

MARKETPLACE

CHOICE *and* AFFORDABILITY



Create affordable coverage options for every American seeking insurance on the individual health insurance market.

- CMS is focused on creating a robust, affordable, stable, consumer-directed individual health insurance market so that all Americans have access to quality healthcare at the lowest possible cost and are empowered to make the best health care decisions for themselves and their families.
- When President Trump took office in 2017, the individual market was in crisis. Premiums had doubled between 2013 and 2017 in states using [HealthCare.gov](https://www.healthcare.gov), and insurers were leaving the market.
- States are the laboratories of innovation and reform, where new ideas can be tested and, when proven successful, can serve as a national model.
- CMS is giving states the flexibility they need to craft innovative solutions that will stabilize their markets, improve their risk pools, and provide more affordable coverage to their citizens at the lowest possible cost.

Our actions have delivered results:

- **The Trump Administration took immediate steps to stabilize the market.**
 - On day one, President Trump issued an executive order that directed agencies to take actions to minimize the economic burden of Obamacare and “to provide greater flexibility to States and cooperate with them in implementing healthcare programs.”
 - Within three months of taking office, this Administration issued the Market Stabilization Rule to improve risk pools by reducing an individual’s ability to game enrollment by waiting to enroll until they become sick and need care.
 - CMS issued the 2019 Payment Notice rule that gave states new regulatory tools to stabilize their health insurance markets.
 - CMS, along with the Department of the Treasury, issued new guidance providing states more flexibility to improve their insurance markets by using Section 1332 waivers under the Patient Protection and Affordable Care Act (PPACA).
 - Since 2017, CMS approved seven section 1332 waivers authorizing state reinsurance programs, all leading to lower premiums, ranging from an 8% reduction in Oregon to a 30% reduction in Maryland.

- Average benchmark premiums declined by 2% for plans sold on [Healthcare.gov](https://www.healthcare.gov), the first reduction since the Exchange began operating.
- There are 23 more issuers offering coverage on HealthCare.gov for 2019 than 2018 and only five states have one issuer in 2019, compared to ten states in 2018.
- **Enhanced the operation and capabilities of the Exchange.**
 - Implemented enhanced direct enrollment that provides a more user-friendly and seamless enrollment experience for consumers by allowing them to enroll in an Exchange plan directly through an approved issuer or web broker without the need to be redirected to [HealthCare.gov](https://www.healthcare.gov).
 - Maintained an all-time high 90% consumer satisfaction rate at the Exchange call center through the 2019 Open Enrollment Period.
- **Improved the overall efficiency and integrity of Exchange operations.**
 - Reduced the user fee on plans offered on [HealthCare.gov](https://www.healthcare.gov) for 2020 thanks to successful efforts to improve the efficiency of the Exchange, including successful efforts to upgrade IT functionality, a more efficient approach to outreach, and investments focused on proven methods to achieve a seamless enrollment experience and high consumer satisfaction.
 - Increased the integrity of the Exchange by closing out 50% of GAO outstanding recommendations related to security in 2018, and established plans to address the remaining 50%.